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# SCHOOL-BASED MENTAL HEALTH, SCHOOL CLIMATE, AND PBIS

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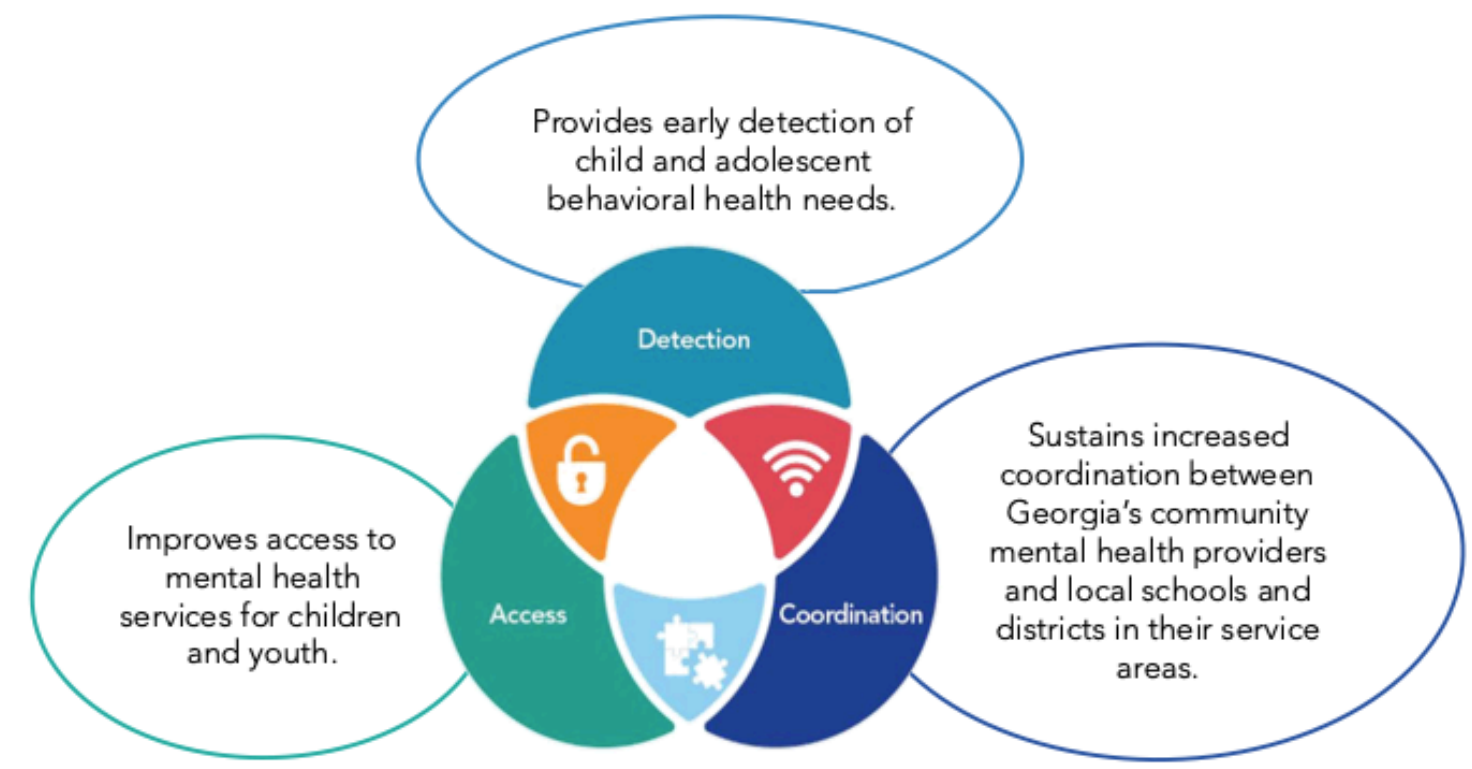
## INTRODUCTION

- School-based mental health (SBMH) programs are a proven strategy for minimizing barriers to accessing services and to help address behavioral health concerns that negatively influence a student’s ability to thrive in school and life.<sup>1</sup>
- Universal prevention delivered through Tier I engagement includes activities utilizing social emotional curricula, mental health awareness and education that have been shown to have a positive impact on overall school climate.<sup>2,3</sup>
- The simultaneous implementation of Positive Behavioral Interventions and Supports (PBIS) provides a framework for improving the school environment, which may also further support school-related outcomes associated with positive school climate.
- This poster presents results from a longitudinal analysis of changes in school-related outcomes for three groups of schools in Georgia: Schools implementing Apex only; schools implementing Apex and PBIS; and all other public schools.

## THE GEORGIA APEX PROGRAM

The Georgia Apex Program, funded by the Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD), is a SBMH program that supports building infrastructure and the placement of providers in schools to provide therapeutic support.

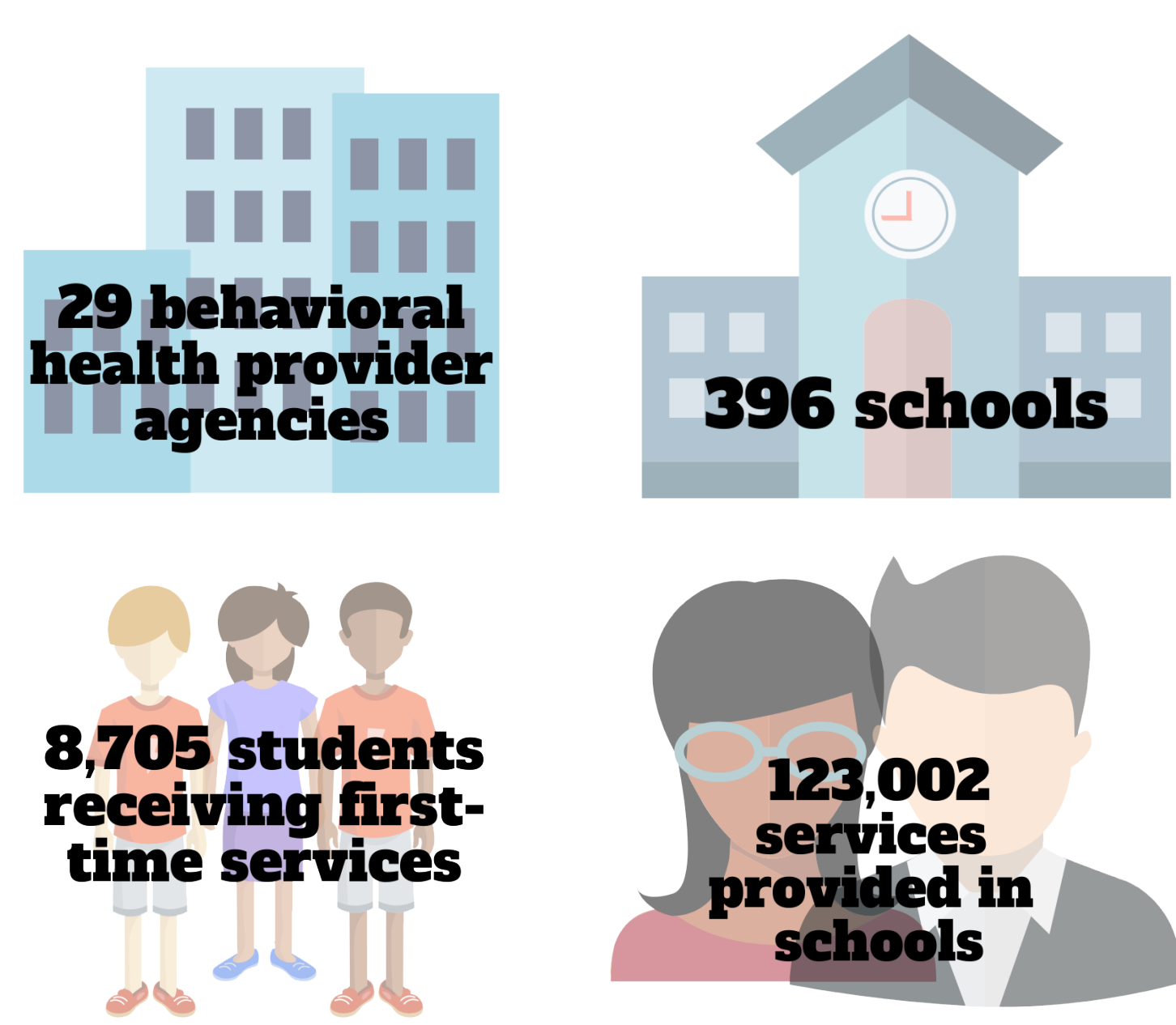
Figure 1: Apex Programmatic Goals



Apex services are present in:

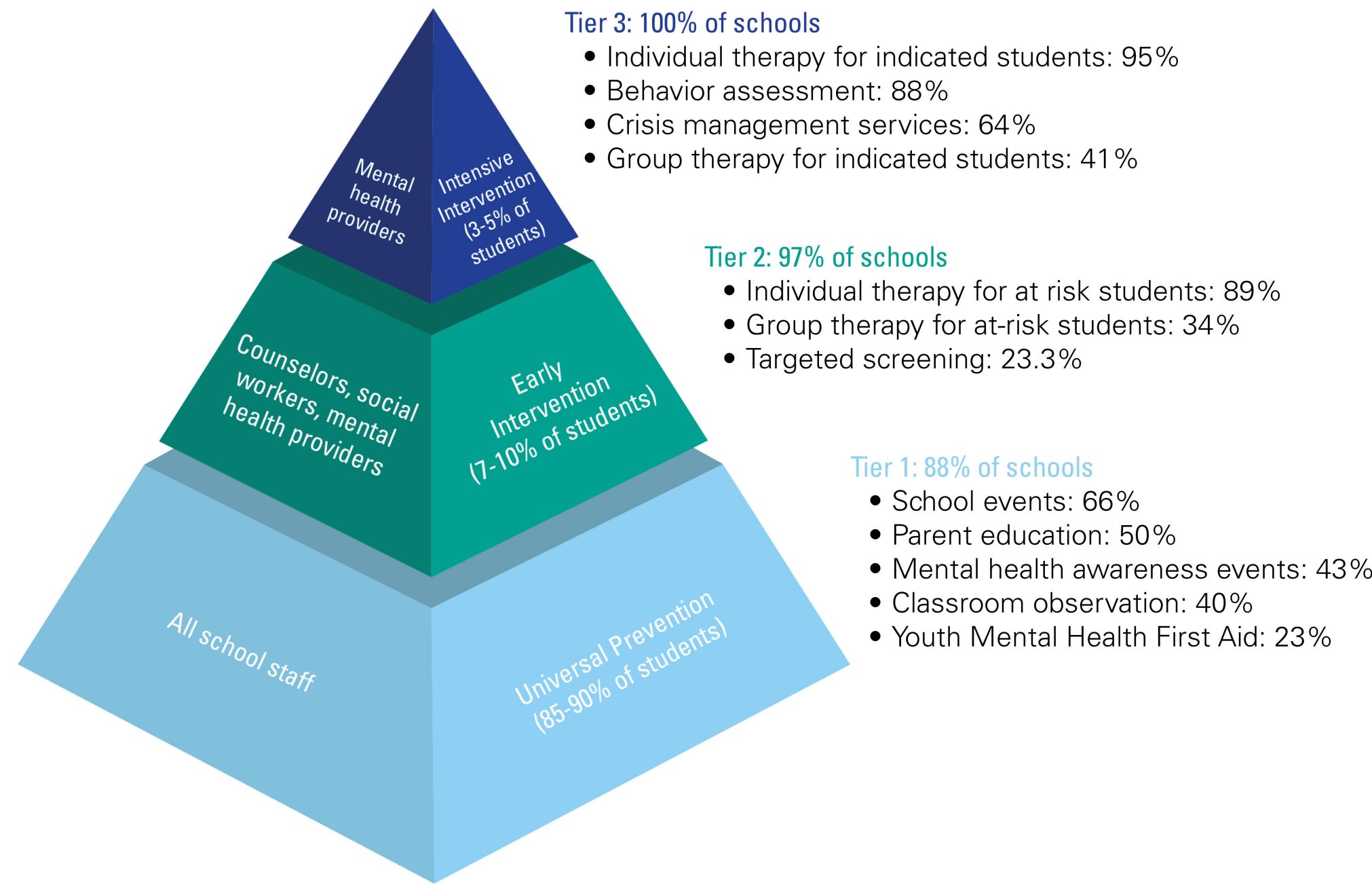
- 87 counties (55%),
- 101 school districts (56%),
- 396 schools (17%) in Georgia

Figure 2: Evaluation Highlights



The Apex Program promotes a multi-tiered approach to delivering services to students. Providers prioritize delivering intensive intervention services to indicated youth represented in Tier III, the top of the “Apex” pyramid.” However, as providers integrate into schools, services are provided across all three tiers in collaboration with their school partners. Figure 3 details the tiered activities reported by schools.

Figure 3: Mental Health Activities with Apex Schools, 2018-2019



## METHODS

This poster uses results from mixed-methods research combining qualitative data from interviews and focus groups with provider agency staff and school partners conducted during year 3 of the program and quantitative data derived from the 2015 and 2018 School Climate Star Ratings collected by the Georgia Department of Education.

Schools were grouped by the following categories: Public schools statewide (n = 1980), Apex only (n = 52), Apex + PBIS (n = 60). A series of paired-samples t-test and GLM analysis were conducted to examine individual indicators of school climate (see Table 1).

Table 1: School-Related Indicators

Outcome	Measures	Data Source
Discipline	Out of School Suspension Rate In-School Suspension Rate Discipline Actions Expulsion	GOSA K-12 Discipline Dashboard
Attendance	Student attendance School-wide Attendance	Student Attendance Record (unexcused absences) Administrator, staff and teacher attendance record (unexcused absences)
School climate	School Climate Star Rating School Climate Final Score Student/ Personnel/ Parent perception of school climate scores Safe and Substance-Free Learning Environment Bullying and Harassment Violent Incidents Drugs and Alcohol	GSHS 2.0 for Elementary School GSHS 2.0 Middle School/High School GOSA K-12 Discipline Dashboard
School partner/ provider agency perspective	Protocol/Practice changes School Climate	Not applicable

Note. GOSA= Governor’s Office of Student Achievement; GSHS = Georgia Student Health Survey

Table 2.

	2015 Star Rating Final Score Mean (SD)	2018 Star Rating Final Score Mean (SD)	Mean Difference
Statewide (n = 1980)	86.91 (6.93)	90.62 (6.17)	-3.70*
Apex (n = 112)**	84.17 (8.34)	88.65 (6.79)	-4.48*

Note. \*p < .05; Star rating final score is score on a scale from 1 to 100.  
\*\*Includes Apex schools with and without PBIS

Authors also examined specific components of school climate with the following results:

Figure 4: Apex and Apex + PBIS Results - Changes from 2015 to 2018

### Apex and Apex + PBIS schools

- Increase in average School Climate Star ratings
- Increase in average scores of Student Perception, Parent Perception and Personnel Perception of School Climate

### Apex Schools Only

- Increased Safe and Substance Free Environment and Drugs/Alcohol Scores



### Apex and Apex + PBIS schools

- Decrease in the average number of Bullying/Harassment incidents
- Fewer student and school-wide unexcused absences

### Apex Schools Only

- Decreased average number of out of school suspensions

## CONCLUSIONS

Our research supports that SBMH programming can contribute to a positive impact on overall school climate. These results demonstrate that fostering a strong partnership between local mental health providers and school systems to address mental health awareness and concerns may contribute to an overall positive school climate. Additionally, the simultaneous implementation of PBIS seems to positively influence school climate in a manner that boosts the impact of SBMH service availability; however, further research and data analysis must be done to understand those connections.

## RESULTS

The results from the analysis showed a statistically significant increase in star rating final score from 2015-2018, F (1, 2090) = 15.29, p < .05 for statewide schools (n = 1980) and all Apex schools (n= 112), (see Table 2). The authors then examined the change in score over time separately for Apex schools with and without PBIS. The largest mean score difference over time was observed for schools implementing Apex with PBIS, F (2, 55242) = 2235.05, p<.05 (see Table 3).

[School climate] helped greatly with attendance because those students that felt like school was a place where nobody understood them, they’re more inclined to come to school now because they felt, “It is a safe place. I’m okay if I’m there.” Attendance has improved.  
–School Partner

“We’ve been very intentional in trying to raise awareness about this mental health work that we’re doing, and what that looks like. I think being out and available and present really helps remove barriers. Raise awareness and reduce stigma.”  
– Apex Provider

Table 3.

	2015 Star Rating	2018 Star Rating Final Score Mean (SD)	Mean Difference
Statewide (n = 1980)	86.91 (6.93)	90.62 (6.17)	-3.70*
Apex (only) (n = 52)	82.42 (7.96)	85.76 (6.68)	-3.34*
Apex + PBIS (n = 60)	85.69 (7.04)	91.16 (6.69)	-5.47*

Note. \*p < .05; Star rating final score is score on a scale from 1 to 100.

## REFERENCES

- <sup>1</sup>Kataoka, S., L. Zhang, and K. Wells. Unmet Need for Mental Health Care among U.S. Children: Variation by Ethnicity and Insurance Status. *American Journal of Psychiatry*. 2002. 159(9); p. 1548-1555.  
<sup>2</sup>Greenberg, M.T. & Domitrovich, Celene & Weissberg, Roger & Durlak, Joseph. (2017). Social and emotional learning as a public health approach to education. *Future of Children*. 27. 13-32.  
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